



Incident Report

Print Date/Time: 01/05/2017 11:04
Login ID: ss0145

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2017-00000106

Incident Date/Time: 1/2/2017 11:38:00 PM
Location: SR 92 / 113TH AVE NE
LAKE STEVENS WA 98258
Phone Number: (360) 913-8447
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 3F
Status: 3
Nature of Call: POSTED TO CITY WEBSITE

Unit/Personnel

Unit	Personnel
1930	SS0072-Aukerman
1939	SS0126-Hingtgen
1944	SS0133-Heinemann
1945	SS0134-Lyons

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Involved Party	SPAFFORD, ERIN NADINE	808 124TH CT NE LAKE STEVENS WA 98258	(425) 879-9613	White	Female	01/02/1966
1	Reporting Party	MCDEAN, CLYDE E		(360) 913-8447			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2001	Chevrolet	SILVERADO		C64205E	WA

Disposition(s)

Disposition	Count
M	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

01/03/2017 : 00:19:47 SP0243 Narrative: TOW ONSCENE

01/03/2017 : 00:10:48 SP0412 Narrative: DOT CB, ADV LIGHT IS LKS CITY, THEY WILL NEED TO REPAIR

01/03/2017 : 00:08:46 SP0321 Narrative: CMD TERM, AID CLEARING.

01/03/2017 : 00:06:22 SP0321 Narrative: PUD ADV THE LIGHT POLE OUT OF ROADWAY, PUD ADV THEY WILL CX

01/03/2017 : 00:05:14 SP0321 Narrative: POLE OUT OF ROADWAY

01/03/2017 : 00:01:20 SP0243 Narrative: SVR Notes: ANGEL TOW PH/360-568-0918 ENRT

01/02/2017 : 23:59:49 SP0243 Narrative: EXTENSIVE FRONT END DAMAGE/12FT OFF ROAD INTO DITCH

01/02/2017 : 23:55:12 SP0321 Narrative: PUD ADV THEY WILL COME OUT TO MAKE SURE IT IS SAFE, BUT SUGGESTED DOT, DOT ADV

01/02/2017 : 23:52:21 SP0321 Narrative: REQ PUD , NO POLE #, FIBERGLASS LIGHT POLE.

01/02/2017 : 23:51:16 SP0321 Narrative: PUD ADV

01/02/2017 : 23:50:46 SP0321 Narrative: 1 PERSON IN DITCH, POLE DOWN, M81 ON W SIDE AGAINST TRAFFIC, INV

01/02/2017 : 23:44:45 SP0243 Narrative: 1944 REQ AID EXPEDITE, FEM CABN/LACERATION TO FACE, POSS CONCUSSION

01/02/2017 : 23:42:03 SP0414 Narrative: FEM CABN, RP STATES FEM BLEEDING FROM FORHEAD

01/02/2017 : 23:40:12 SP0414 Narrative: AC, NOW, WHI CHEVY/ FORD IN DITCH, RP THINKS FEM BLEEDING, AID DISPATCHERS BUSY

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SNOPAC

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IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound ☒ Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):

(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)

Case Number: 2017-106 Reason: COL

MKE/ (Circle One) ☒ EV ☐ EVIP ☐ EVR

ORI/ WA0311900

LIC/ E64205E LIS/ WA LIV/ 2017 LIT/ TRK

VIN/ 1GCEC14V91Z231730

VYR/ 2001 VMA/ CHEV VMO/ SILVERADO

VST/ 2D VCO/ WHI

DATE OF IMPOUND/REPO: 01/03/17

TOW COMPANY NAME: ~~SM~~ Angel Tow

TOW COMPANY OCA/ ** 5555 PHONE #: 360 568 0918

**(For Repossession Company with no DOL issued OCA, use 5999)

Address Taken From: 11200 BLK SR 92

City of Jurisdiction: LKS

For Repo:

Financial Institution:

Contact Person:

Phone #:

For Teletype:

Date: 01/03/17

Entered By: SP0912

WAC #: 17V0000970

Checked By: _____

Checked Date: _____

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01/03/2017 TUE 3:17 FAX 4253349842 Lake Stevens Police Dept --- SnoPac

0002/002

CHECK ALL THAT APPLY:

- ☒ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 89.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

2017-000000106

VEHICLE INFORMATION

VIN 1G1CE1C141V91122317310				
LICENSE C64205E	STATE WA	YEAR 2001	MAKE CHEVY	MODEL SILVERADO
MILEAGE <input type="checkbox"/> Report of Sale <input type="checkbox"/> Digital		STYLE 2DR	COLOR WHT	

DRIVER		REGISTERED OWNER	LEGAL OWNER
NAME (LAST, FIRST, MI) LAXMAN		NAME (LAST, FIRST, MI) SPAFFORD, SPIN N	NAME (LAST, FIRST, MI) SAME AS RO
STREET ADDRESS		STREET ADDRESS 808 124TH CT NE	STREET ADDRESS
CITY, STATE, ZIP CODE		CITY, STATE, ZIP CODE LAKE STEVENS WA 98258	CITY, STATE, ZIP CODE
PHONE	DOB	PHONE	PHONE

AUTHORIZATION AND RECEIPT

ON 1-3-17 AT 6:15 PM PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I AUTHORIZED ANIEL TOWING (TOWING FIRM) 5024-8 (DDL TRUCK NO.) DRIVEN BY [Signature] TO REMOVE THIS VEHICLE FROM 112th Blk SR 92 (LOCATION)

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input checked="" type="checkbox"/> KEYS	<input checked="" type="checkbox"/> FRONT SHADE DAMAGED AREA		
<input type="checkbox"/> LOCKED TRUNK	<input checked="" type="checkbox"/> R FRONT		
<input checked="" type="checkbox"/> LOCKED GLOVE BOX	<input type="checkbox"/> R SIDE		
<input checked="" type="checkbox"/> LOCKED CENTER CONSOLE	<input type="checkbox"/> R REAR		
<input checked="" type="checkbox"/> AUTO STEREO	<input checked="" type="checkbox"/> L FRONT		
<input type="checkbox"/> DISC(s)	<input checked="" type="checkbox"/> L SIDE		
<input checked="" type="checkbox"/> HANDS FREE DEVICE	<input type="checkbox"/> L REAR		
<input checked="" type="checkbox"/> GPS	<input type="checkbox"/> REAR		
<input type="checkbox"/> RADAR/LIDAR DETECTOR	<input type="checkbox"/> TOP		
<input type="checkbox"/> SPARE TIRE	<input checked="" type="checkbox"/> UNDERCARRIAGE		
<input type="checkbox"/> JACK	<input type="checkbox"/> OTHER _____		
<input type="checkbox"/> CHAINS			
<input type="checkbox"/> OTHER _____			

INVENTORY

NARRATIVE OR DIAGRAM

VEH INVOLVED IN COLLISION, CRASH
TRANSPORTED TO INDICATED MEDICAL
WAS DRIVER

- ☐ I PROVIDED A COPY OF THIS TOW/IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.
☐ I PROVIDED A COPY OF THIS TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE. ☐ THE VEHICLE WAS ABANDONED - A COPY OF THE TOW/IMPOUND REPORT WAS LEFT WITH THE VEHICLE.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE X [Signature] 133 [Signature] 133 LSPD
COUNTY, WA BADGE NO. AGENCY

3000-110-076 (R 7/13)

SUPERVISOR

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SNOPAC

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DOLDBE555SEL73.WASHINGTON STATE DEPARTMENT OF LICENSING QUERY
RESPONSE

REGISTRATION QUERY. LIC/C64205E

LIC/C64205E.LIT/TRK.

TAB/L404171.EXP/02-26-2017.

VIN/1GCEC14V91Z231730.

VCO/WHI.VYR/2001.VMA/CHEV.VMO/SILVERADO.VST/PK.

TON/8000.TXP/02-26-2017.

REGISTERED OWNER INFORMATION

NAM/SPAFFORD, ERIN N.PIC/SPAFFEN343BB.

STR/22922 N RIVER DR.

CIT/GRANITE FALLS.STA/WA.ZIP/98252-9158.

LEGAL OWNER INFORMATION

LEGAL OWNER SAME AS ABOVE

TITLE INFORMATION

TTL/1605717503.TLD/02-26-2016.

NOTIFICATIONS

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WACICE567SEL73.QV.WA031L73N.LIC/C64205E

----- RECORD NUMBER 1 OF 1 -----

EXACT MATCH

NO WANTS-IMPOUNDED VEHICLE (BASED ON LIC,LIS)

MKE/EVI ORI/WA0311900 LIC/C64205E.WA.2017.PC

VIN/1GCEC14V91Z231730.2001.CHEV.SLV.PK.WHI DOT/01/03/2017

OCA/5555

MIS/VERIFY 425 407 3904, LKS IMPOUND 2017-106 TO ANGEL TOW 360 568

0918

ENT: 01/03/2017 AT 0332 FROM EVECC BY/PD LAKE STEVENS (EVECC)

WAC/17V0000970 FIL/I1700300455

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. **E627877**CASE # **2017-00000106**LOCAL AGENCY
CODINGTOTAL # OF
UNITS**02**OBJECT
STRUCK**EARTH BANK OR LEDGE**TRIBAL
RESERVATIONDATE OF COLLISION
01 - **02** - **2017**

TIME (2400)

2339

COUNTY #

31

MILES

0.00**0664**

CITY #

ON (PRIMARY TRAFFIC WAY)

INTERSECTION ☐NON-INTERSECTION ☒**SR 92**BLOCK NO. ☒

MILE POST

11200

DISTANCE

90**00**

MILES

☒ N☒ S☒ E☒ W

OF (REFERENCE OR CROSS STREET)

113TH AVE NE

UNIT 01

MOTOR
VEHICLE ☒PEDAL-
CYCLE ☐DAMAGE THRESHOLD MET
YES ☒ NO ☐

PHONE

LAST NAME

UNKNOWN

FIRST NAME

MIDDLE
INITIALSTREET
NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

UD.O.B.
MMDDYYYYON DUTY ☐

STATUS

AIRBAG

2

RESTR.

9

EJECT

1HELMET
USE**9**INJURY
CLASS**0**

NATURE OF INJURIES

LICENSE
PLATE #**C64205E**

STATE

WA

VIN#

1GCEC14V91Z231730TRAILER
PLATE #

STATE

TRAILER
PLATE #

STATE

VEH. YEAR

2001

MAKE

CHEV

MODEL

SILVER

STYLE

PLVEHICLE TOWED
YES ☐ NO ☒

TOWED BY

GOVT. VEHICLE
YES ☐ NO ☒REGISTERED OWNER INFO. **ERIN SPAFFORD 808 124TH CT NE LAKE STEVENS WA 98258**LIABILITY INSURANCE
IN EFFECT ☒INSURANCE CO
& POLICY #**CENTINEL 84UEGKV2783**VEHICLE
LEGALLY
STANDINGYES ☐ NO ☐

CITATION #

CHARGE

UNIT 02

MOTOR
VEHICLE ☐PEDAL-
CYCLE ☐PEDESTRIAN ☐PROPERTY
OWNER ☒DAMAGE THRESHOLD MET
YES ☒ NO ☐

PHONE

LAST NAME

SNOHOMISH

FIRST NAME

COUNTY PUDMIDDLE
INITIALSTREET
NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

UD.O.B.
MMDDYYYYON DUTY ☐

STATUS

AIRBAG

2

RESTR.

9

EJECT

1HELMET
USE**9**INJURY
CLASS**0**

NATURE OF INJURIES

LICENSE
PLATE #

STATE

VIN#

TRAILER
PLATE #

STATE

TRAILER
PLATE #

STATE

VEH. YEAR

2001

MAKE

CHEV

MODEL

SILVER

STYLE

PLVEHICLE TOWED
YES ☐ NO ☒

TOWED BY

GOVT. VEHICLE
YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE
IN EFFECT ☐INSURANCE CO
& POLICY #**CENTINEL 84UEGKV2783**VEHICLE
LEGALLY
STANDINGYES ☐ NO ☐

CITATION #

CHARGE

OFFICER'S NAME (PRINT)

W. AUKERMAN

BADGE OR ID #

72

AGENCY

WA0311900PAGE 01 OF **4**

PART A 3000-345-159 R (7/06)



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E627877**CASE # **2017-00000106**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		SPAFFORD ERIN N																		
ADDRESS & PHONE # 808 124TH CT NE LAKE STEVENS WA 98258														SEX F	D.O.B. MMDDYYYY 01		-	02	-	1966
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	2	AIRBAG	2	RESTR.	1	EJECT	1	HELMET USE	2	INJURY CLASS	5	NATURE OF INJURIES POSSIBLE SKULL FRACTURE		
NAME (LAST, FIRST, MIDDLE INITIAL)																				
ADDRESS & PHONE #														SEX	D.O.B. MMDDYYYY		-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)																				
ADDRESS & PHONE #														SEX	D.O.B. MMDDYYYY		-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES		

NARRATIVE

Please see subsequent narrative pages

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

01-03-17 08:59 PM

DATED

PLACE SIGNED

APPROVED BY

R. BROOKS 0013

DATE

1/4/2017 5:34:58 AM

BADGE OR ID #	72	ORI #	WA0311900	TIME POLICE DISPATCHED	11:40 PM	TIME POLICE ARRIVED	11:43 PM
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REPORT NO. E627877

CASE #

2017-00000106

DATE AND TIME
OF COLLISION

01/02/17 23:39

NARRATIVE

On 01/02/2017 at 2340 hours I responded to a single vehicle collision in the 11200 block of SR 92 in the city of Lake Stevens. Arriving on scene U1 was found to be facing northeast in the ditch just to the north of the westbound lane of travel for SR 92.

Several passing motorists had stopped, who all claimed to not have seen the collision and who arrived after the fact.

An adult female was found outside of the vehicle, on the passenger side, in the ditch. The vehicle was positioned on a steep bank, having the passenger door to the low side of the vehicle. The female appeared to have a large opening above her right eye socket (possible skull fracture). The female was also found to be the registered owner of the vehicle and this day was her birthday. the female smelled of intoxicants and claimed she had met a male at the Creekside bar and grill and that the male had been driving the vehicle. No other persons were found in the area.

The female's head injury appeared to be caused by the passenger door manual window handle. The vehicle impact was in the area of the front passenger corner, which cause all the loose debris and occupant(s) in the vehicle to be pushed up against the passenger floor board in the vehicle, indicating the female had not been wearing her seatbelt and she also traveled towards the front passenger corner. Due to the location of the injury on the female I suspect she had to atleast be positioned in the vehicle from the center front seat to the driver's seat; not being in the passenger seat next to the passenger door. Fire Dept personnel on scene used a thermal imager and found only a heat signature emanating from the driver's seat.

The female was transported from the scene by aid car with basic complaints of being cold, the head injury and possible back injury.

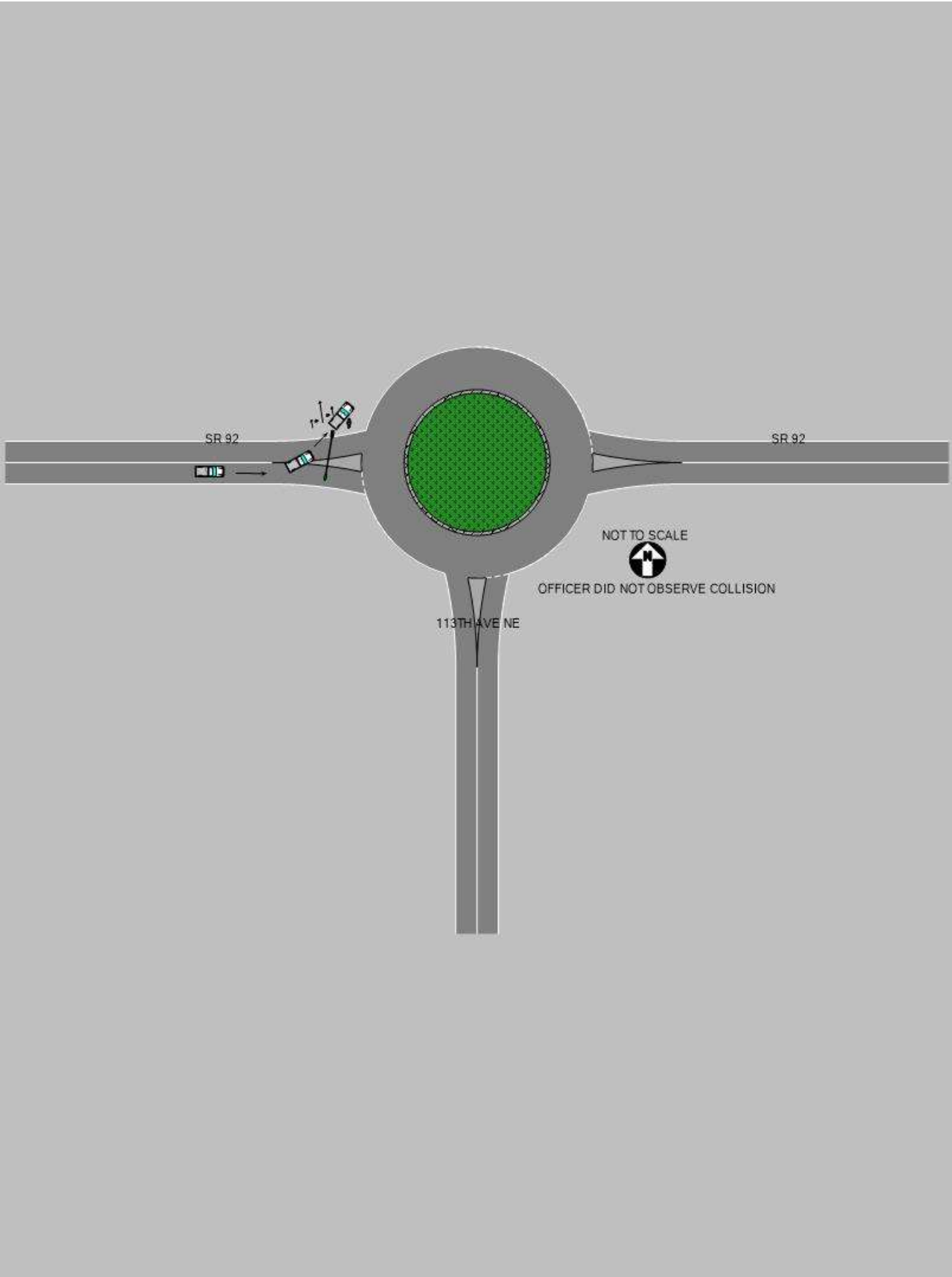
The vehicle was removed from the scene by Angel Towing. Due to the light pole (resign) being brought down, PUD was notified.

On 01/03/2017 I went to the hospital to speak with the injured female. I was told by hosptial staff that she had been released from the hospital. I attempted contact at her listed DOL address in Lake Stevens and she no longer lives there. I attempted to call two listed phone numbers for her and they were not correct. The address on this date where her vehicle is registered, has icy driving conditions and could not be checked.

REPORT NO. E627877

CASE # 2017-00000106

DATE AND TIME
OF COLLISION 01/02/17 23:39



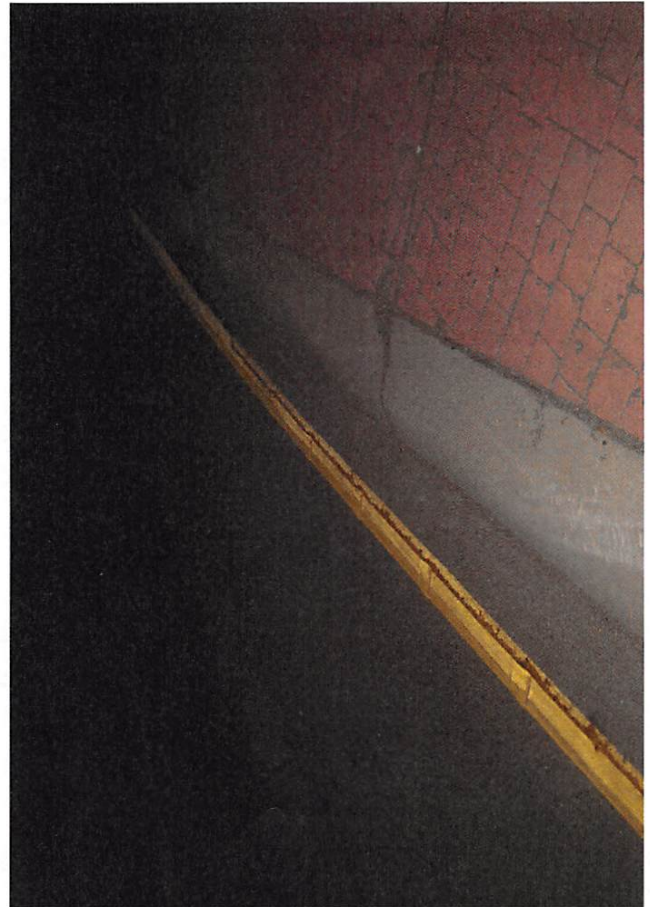
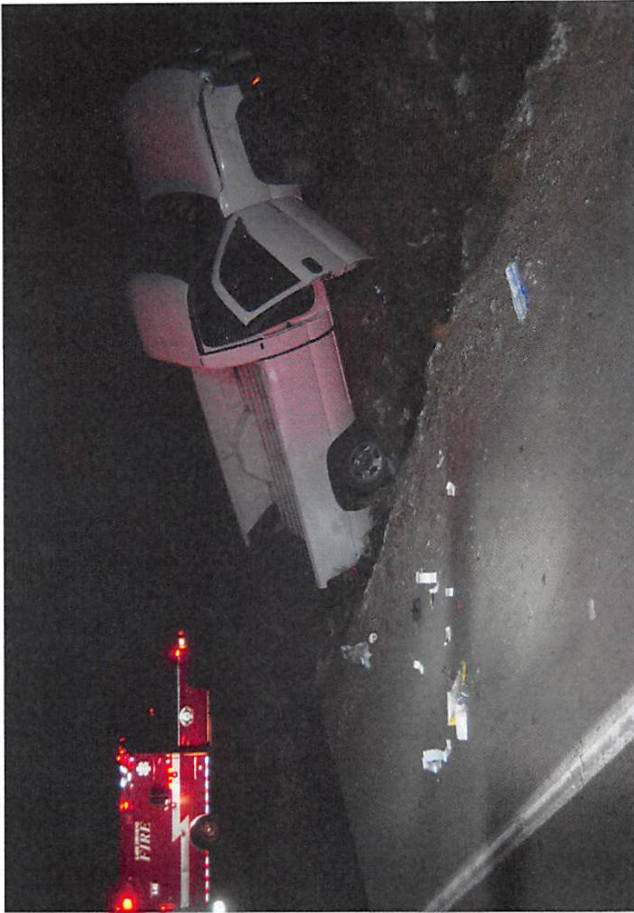
CHECK ALL THAT APPLY: <input type="checkbox"/> NON-IMPOUND / TOW <input type="checkbox"/> AAA or OTHER ROADSIDE ASSISTANCE <input type="checkbox"/> EVIDENCE <input type="checkbox"/> SEIZED UNDER RCW 69.50.505 <input checked="" type="checkbox"/> IMPOUND ONLY <input type="checkbox"/> DUI/PC IMPOUND WITH 12 HOUR HOLD <input type="checkbox"/> DWLS IMPOUND WITH _____ DAY HOLD <input type="checkbox"/> INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER. <input type="checkbox"/> REGISTERED OWNER MAY REDEEM _____ <input type="checkbox"/> CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD. <input type="checkbox"/> CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.		UNIFORM WASHINGTON STATE TOW / IMPOUND AND INVENTORY RECORD		CASE / EVIDENCE NUMBER 2017-000000106	
VEHICLE INFORMATION					
VIN 1GCEC1HV91Z231730					
LICENSE C64205E		STATE WA	YEAR 2001	MAKE CHEVY	MODEL SILVERADO
<input type="checkbox"/> Report of Sale		MILEAGE <input type="checkbox"/> Digital	STYLE 2DR		COLOR WHIT
DRIVER		REGISTERED OWNER		LEGAL OWNER	
NAME (LAST, FIRST, MI) UNKNOWN		NAME (LAST, FIRST, MI) SPAFFORD, ERIN N		NAME (LAST, FIRST, MI) SAME AS RD	
STREET ADDRESS		STREET ADDRESS 808 124TH CT NE		STREET ADDRESS	
CITY, STATE, ZIP CODE		CITY, STATE, ZIP CODE LAKE STEVENS WA 98258		CITY, STATE, ZIP CODE	
PHONE	DOB	PHONE		PHONE	
AUTHORIZATION AND RECEIPT					
ON 1-3-17 (DATE) AT 0015 (24 HOURS) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE					
ITEMS IN THE DESCRIBED VEHICLE, I AUTHORIZED ANIEL TOWING (TOWING FIRM) SOLA-S (DOL TRUCK NO.)					
DRIVEN BY J Strudling (DRIVER'S PRINTED FIRST AND LAST NAME) TO REMOVE THIS VEHICLE FROM 11200 BIK SR 92 (LOCATION)					
EQUIPMENT		DAMAGE		EVIDENCE (DRIVER'S SIDE)	
<input checked="" type="checkbox"/> KEYS <input type="checkbox"/> LOCKED TRUNK <input checked="" type="checkbox"/> LOCKED GLOVE BOX <input checked="" type="checkbox"/> LOCKED CENTER CONSOLE <input checked="" type="checkbox"/> AUTO STEREO <input type="checkbox"/> [] DISC(s) <input checked="" type="checkbox"/> HANDS FREE DEVICE <input checked="" type="checkbox"/> GPS <input type="checkbox"/> RADAR/LIDAR DETECTOR <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____		<input checked="" type="checkbox"/> FRONT SHADE DAMAGED AREA <input checked="" type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input checked="" type="checkbox"/> L FRONT <input checked="" type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input checked="" type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____			
INVENTORY		NARRATIVE OR DIAGRAM (List reason(s) for impound.) VEH INVOLVED IN COLLISION, OWNER TRANSPORTED. INDICATED MENDAM WAS DRIVER			
<input type="checkbox"/> I PROVIDED A COPY OF THIS TOW/IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.		<input type="checkbox"/> THE VEHICLE WAS ABANDONED - A COPY OF THE TOW/IMPOUND REPORT WAS LEFT WITH THE VEHICLE.			
<input type="checkbox"/> I PROVIDED A COPY OF THIS TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE.		<input type="checkbox"/> THE VEHICLE WAS ABANDONED - A COPY OF THE TOW/IMPOUND REPORT WAS LEFT WITH THE VEHICLE.			
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)					
OFFICER'S SIGNATURE X [Signature]		COUNTY, WA	BADGE NO. 133	AGENCY LSPD	

3000-110-076 (R 7/13)

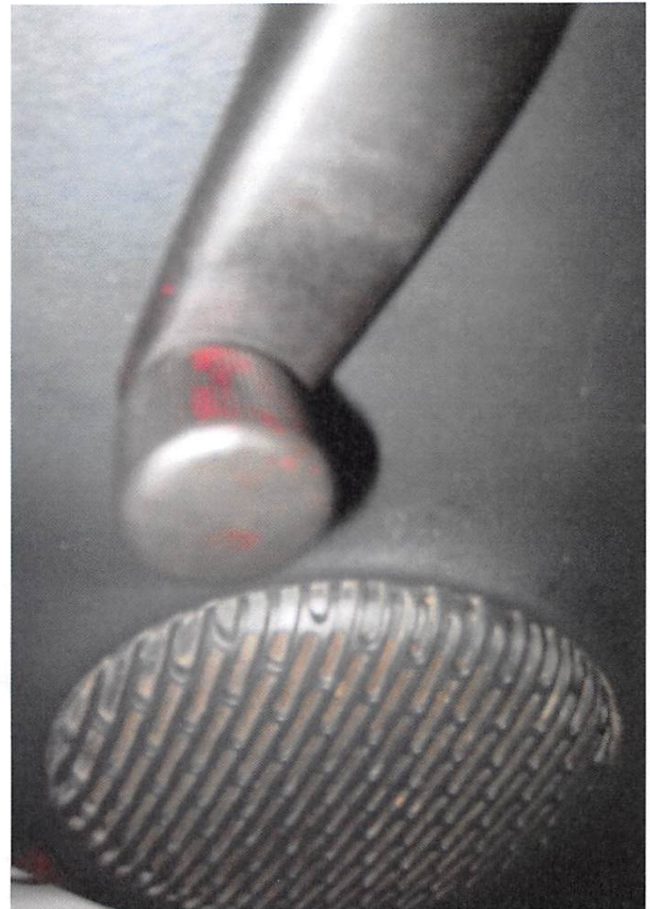
SUPERVISOR



2016-01-06

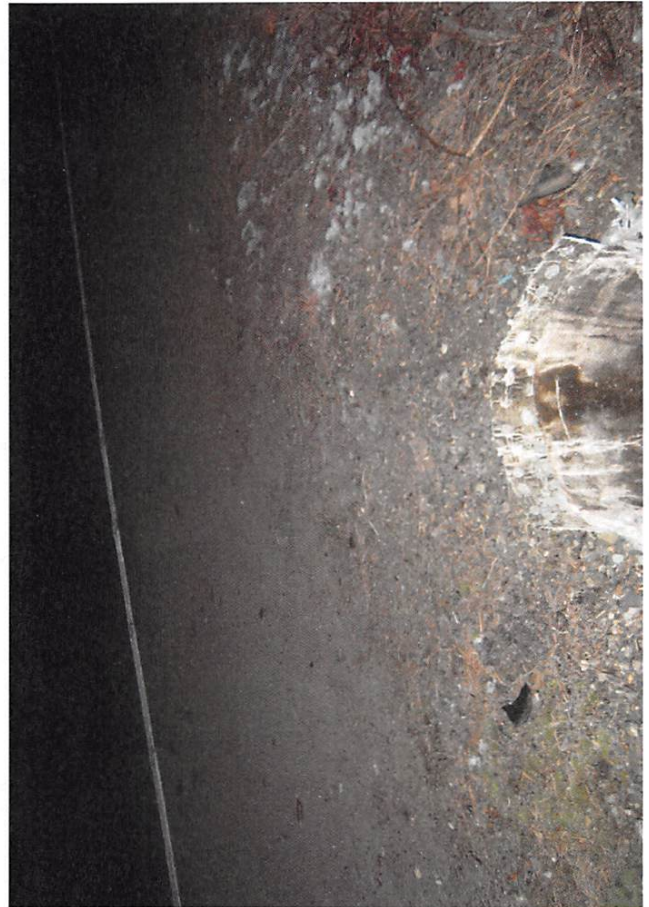
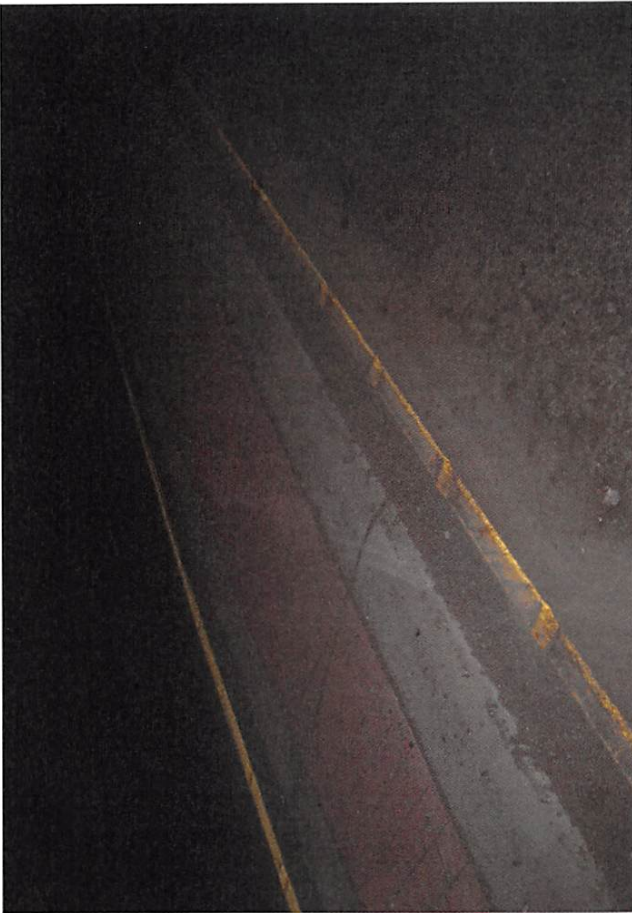


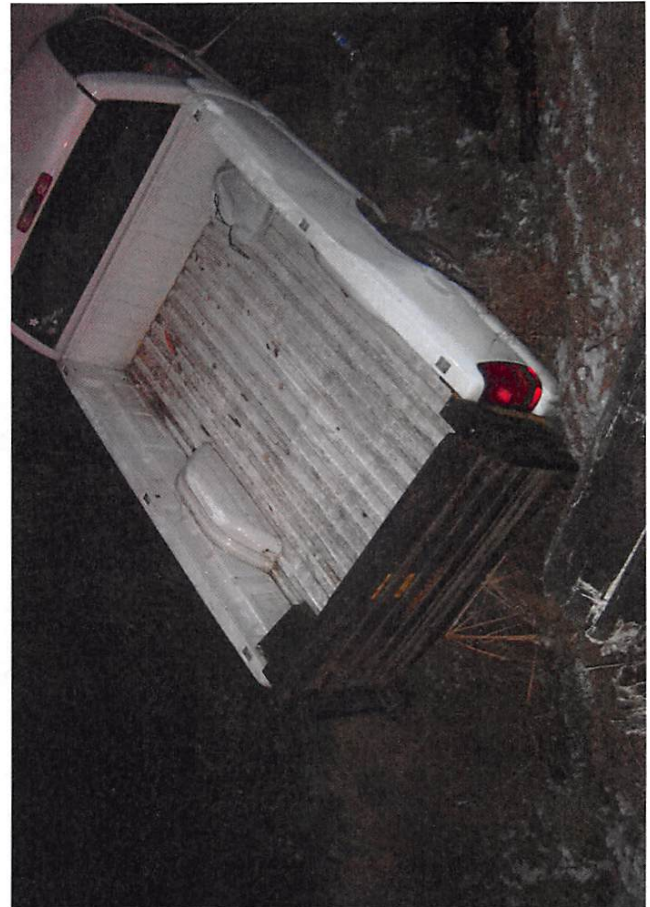
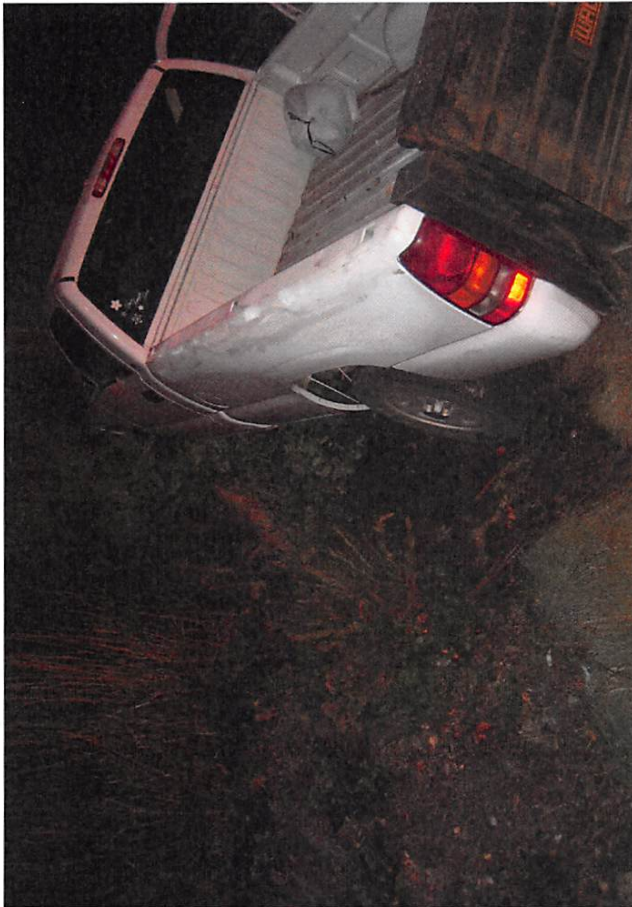
2016-0106



2016-01-06

2016-0106





2016-01-06